

## INDIANA ENVIRONMENTAL STEWARDSHIP PROGRAM ANNUAL PERFORMANCE REPORT

State Form 53475 (11-07) INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT **ENVIRONMENTAL STEWARDSHIP PROGRAM** 

**Indiana Department of Environmental Management** Office of Pollution Prevention and Technical Assistance

100 North Senate Avenue IGCS W041 Indianapolis, IN 46204-2251 Telephone: (800) 988-7901

FAX: (317) 233-5627 E-mail: esp@idem.IN.gov www.in.gov/idem/prevention/esp

When to use this annual report form...

STOP! Is your facility a member of the U.S. Environmental Protection Agency's National Environmental Performance Track and Indiana Environmental Stewardship Program? If so, please use the U.S. EPA National Environmental Performance Track Annual Performance Report form available at http://www.epa.gov/performancetrack/program/report.htm. The U.S. EPA will notify IDEM after receiving your annual performance report.

GO! Please use this annual report form if you are only a member of the Indiana Environmental Stewardship Program and not a member of the National Environmental Performance Track. Your Annual Performance Report should be reviewed and signed by a senior manager at your facility prior to submittal. Once signed, fax, mail, or e-mail the report to IDEM. If you have any questions, please contact the ESP Program Manager at 800-988-7901.

The Indiana Environmental Stewardship Program (ESP) Annual Performance Report should demonstrate progress toward objectives and targets AND certify ESP requirements continue to be achieved. The Annual Performance Report should cover the twelve (12) month calendar year and include the status of projects committed to in your facility's original ESP application, results of completed projects, and assurance that an annual internal environmental management system audit was conducted by your facility. Indiana ESP facilities must submit an Annual Performance Report by April 1st of every year, for each calendar year in which the entity has been a member for at least three (3) full months.

Please do not include any confidential business information in your Annual Performance Report. Public access laws require IDEM to make the Annual

Performance Report publicly available, which may include posting all portions of your report on the Indiana ESP Web site.
SECTION A FACILITY INFORMATION
Name of Facility
Mead Johnson & Company
Name of Parent Company (If applicable)
Bristol-Myers Squibb Company
Street Address (number and street)
2400 West Lloyd Expressway
City/State/ZIP Code
Evansville, IN 47721-0001
Facility/Company Web site
http://www.bms.com/sr/data/index.html
CONTACT INFORMATION
Contact Name (Mr./Mrs./Ms./Dr.)
Mr. David A. Stuckey
Title
Associate Director, Environmental, Health & Safety
Telephone number
812-429-7021
FAX number
812-429-5405
E-mail address
Dave.Stuckey@bms.com
Mailing Address (if different from facility address)
City/State/ZIP Code
Reporting Period Dates
January-December 2008 2007
If this is your third Annual Performance Report, do you wish to renew your Indiana Environmental Stewardship Program membership?
☐ YesIf yes, please complete all sections of this annual report.
☐ NoIf no, you can skip Section D of this annual report.
The Thirty you can only decident but and annual report.
CHANGE IN INFORMATION
In your ESP application and, perhaps, in previous annual performance reports, you described what your facility does or makes. Have there been any changes or additions to your facility's list of products or activities? If so, please list them in the space below.
☐ Yes ☒ No

	MENT SYSTEM ASSESSMENT
Why do we need this information?  IDEM needs information on the performance and assessment activities of your Environmental Management System (EMS).	What do you need to do? Please summarize your facility's EMS assessments. Attach additional sheets as necessary.
Is your facility currently registered to a recognized third-party EMS	Allaon additional shoots as nocessary.
standard?	Year:
Yes	Туре:
<ul> <li>a. If yes, when was an EMS audit or other assessment last conducted by an independent third party at your facility?</li> </ul>	Scope:
Please provide the type (e.g., ISO 14001 certification),	Month:
scope, and month of the last assessment.  ⊠ No	
b. If no, when was an internal or corporate EMS audit last	Year: 2006
conducted at your facility? Please provide the scope and	Scope: ESP Standards
month of the last assessment.	
2 Miles did con facility less application interests	Month: October
When did your facility last conduct an internal or corporate compliance audit? Please provide the scope and month(s) of each	Year: 2007
audit, and indicate who conducted the audit(s) (e.g., facility staff,	Areas of Emphasis: Solid and Hazardous
corporate groups, third party). Do not include audits, inspections, or	Waste, Radiation Safety and Health Physics,
site visits by regulatory organizations.	Occupational Health, Fire Protection,
	Safety/Loss Prevention
	Salety Boss 110 volition
	Standard Sagnas
	Standard Scopes:
	Scope: Self-Assessment Program, Risk Management,
	Organization, Structure and Staffing,
	Management of Change, Incident
	Investigation and Reporting, EHS Training
	and Communications, Facility EHS Goals,
	Rules, Procedures and Guides, Corrective
	Actions Planning and Tracking, Emergency
	Preparedness and Response.
	*
	Month(s): September 24-28
	Who: Corporate Quality, Environment, Health &
	Safety EHS Evaluation Department
<ol> <li>(Optional) Please describe any other audits that were conducted at your facility.</li> </ol>	
Has your facility corrected all instances of potential non-compliance	Summary of Corrective Actions from Environmental
and EMS non-conformance identified during your audits and other assessments?	Programs Review:
⊠ Yes	A more descriptive job-training matrix was created, and
<ul> <li>a. If yes, briefly summarize corrective actions taken and other improvements made as a result of your EMS</li> </ul>	added to the RCRA SOP.
assessment(s) or compliance audit(s).	Storage of fluorescent lightbulbs was improved.
□No	Replacement infectious waste containers were placed
<ul> <li>b. If no, please explain your plans to correct these instances.</li> </ul>	on Dock 3 and Occupational Health Services.
☐ No such instances identified.	Site waste management program SOP was updated to
E 140 Sacri Motanico Caritinos.	incorporate the waste characterization plan required by
	corporate directive.
	*
	Site asbestos policy was updated to include annual
	inspection requirement of the corporate directive.
	A tote containment skid and drain mat were installed in
	the Building 58 used oil collection area.
Explain the emergencies experienced within the facility during the	No applicable environmental emergencies
past year. Were the applicable emergency and contingency plans	No applicable environmental emergencies
detailed in the EMS effective? What changes, if any, have been	occurred in 2007.
made to your facility's emergency or contingency plans?  6. When was the last Senior Management review of your EMS	Month/Year: 10/2006
completed?	
	Who headed the review? Name and Title: David A. Stuckey,
W Miles did confeely lest and the confeely	Associate Director, EHS
<ol><li>When did your facility last conduct a systematic identification or</li></ol>	Month/Year: 12/2003

	our environmental aspects?		
10. (Optional) toward EN Environme	Please provide a narrative summary of progress made S objectives and targets <u>other than those reported as an</u> ntal Performance Initiative in the following section. You	Environmental Aspect	Progress Made This Year (e.g., quantitative or qualitative improvements, activities conducted
	ne summary to environmental aspects that are significant s which progress has been made during the last calendar	Non-Hazardous Waste	A new manufacturing
	th additional sheets as necessary.	Minimization	requirement created the
			need to enhance an
			existing drum-cleaning
			and re-use program.
			During 2007, 43,000
			drums were recycled into
			manufacturing versus
			disposal to landfill.
			417 Tons of Paper were
			Recycled.
			400 Tons of Cardboard
			were recycled.
			4506 Tons of off-
			specification nutritional
			product was collected and
			sent for re-use as animal
			feed.
			553 Tons of pallets were
			cleaned for re-use instead
			of being discarded.
			100 Tons of metals were
			recycled.
			10 Tons of Used Oil from
			equipment was recycled.
			Purchase of cloth lab coat
			to replace disposable,
			Tyvek lab coats for
			production area use.
			Three new recycling
			program are planned for
			2008 implementation:
			(1) Recycling of plastic
			beverage containers.
			(2) Recycling of damaged
			metal product containers
			currently sent to landfill.
			(3) Flourescent light
			recycling program.
			Non-Hazardous waste in
			Evansville was reduced
			22% from 2006 volumes.
			Non-Hazardous Waste in
			Mt. Vernon was reduced
			9% from 2006 volumes.

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Why do we need this information Facilities need to share the results of	of the environmental		se the following table to summarize	What do you need to do? your facility's environmental
improvement initiative that was purs		d. performance	as compared to your ESP environr	nental improvement initiative.
Category: Energy Use - No			<del>)</del>	
Aspect: Total Energy General Specific Information on Aspect (opti-			7/25	
Specific Information on Aspect (opti-	onal): Lanulli Gas	Progress during year	Environmental Improvement	Cost Savings
	Baseline	2007	Initiative Goal	(if applicable)
Actual Quantity (per year)	0	0	450,000	
Measurement Unit	Dekatherms	Dekatherms	Dekatherms	
Normalized Quantity (per year)				
Basis for your Normalizing Factor (e.g., gallons of paint produced) Briefly describe how you achieved in				
contract negotiations an flow to the facility is estimple.  Please list any state, EPA, or other process.  (Optional) If your facility has experient	mated at January 20	you are reporting this data (e.	g., Energy Star, Project XL).	
those results here. Although the landfill met environmental performa	<b></b>	•		nprove
SECTION D Why do we need this information		ONMENTAL IMPROVEMENT	INITIATIVES	What do you need to do?
Facilities need to demonstrate their	commitment to		Refer to the Envir	onmental Performance Table
improving environmental performance. For ESP membership, you must ident the application and the remaining with questions. Choose an indicator from Performance Indicator Table is proviselect for your initiative should be reenvironmental impact in your EMS, sure how your objectives and targets IDEM at 800-988-7901.	ntify three (3) environmental in il be identified each year in the n the Environmental Performan ded with the ESP Application lated to the objectives and tary No more than two of your indi-	e annual report. Identify the ne nce Indicator Table to measure and is also available at http://w gets in your EMS. Where poss cators can be from the same e	ew initiative that will begin this year e the identified environmental initia www.in.gov/idem/prevention/esp/tal sible, indicators should also be ider environmental category during the 3	by answering the following tive. The Environmental ble.doc. The indicator you ntified as having a significant Byear term. If you are not
Please complete the following quest information is required for air, hazard				e Indicator Table. Additional
1a What category have you selected				
please turn to Appendix 1 to co Generation	mplete additional questions pe	ertaining to the category you h	ave selected.) Waste - Non-	-Hazardous Waste
1b What indicator have you selected	from the Environmental Perfo	rmance Table? Reduce I	Non-Hazardous Waste	
	subset of the indicator (e.g., a tiative include everything cover	specific material, process, VO	acility. For many indicators, you m C, group of toxic air emissions, or /OCs, all non-hazardous waste), or	particular
If your initiative is specific to a si	ubstance or component, pleas	e provide additional detail on y	our indicator (e.g., specific chemic	al to be reduced, specific

1d What activities or process changes do you plan to undertake at your facility to accomplish your initiative (e.g., technology changes in a particular process line, employee training)? Increased tracking of production waste. Identify additional re-use and recycling opportunities.

**ENVIRONMENTAL IMPROVEMENT INITIATIVE RESULTS** 

SECTION C

waste component).

Implement process improvements where feasible.

2a Does this initiative address a significant aspect in your EMS?  ☑ Yes ☐ No
2b If no, please explain why you believe this indicator should be included as an environmental improvement initiative.
Stop! If the category listed in Question 1a is Energy Use, Waste, or Air Emissions for Total GHGs, please skip Questions 3a – 3b below and turn to Appendix 1 to complete the questions pertaining to the category you listed. After completing Appendix 1, return to question 4 and complete the remaining questions regarding your facility's environmental improvement initiative.
3a What units are you using to quantify this indicator? (Please refer to the Environmental Performance Indicator Table for the acceptable units for each indicator.)
3b List the baseline annual quantity of the indicator and the annual quantity you are committing to achieve by the future year.  Baseline quantity Year  Future year quantity (not including production) Year
<ul> <li>Does the quantity presented in the future quantity column represent an absolute goal or a normalized goal?</li> <li>Normalized goal (i.e., indexed to level of business in baseline year)</li> <li>Absolute goal (i.e., demonstrates improvement even if production increases)</li> </ul>
5 Whether your goal is absolute or normalized, you will need to provide normalizing factors and normalized quantities in your annual performance reports. Please briefly describe your basis for normalizing. Examples of potential normalizing basis include: gallons of paint produced, square feet of circuit boards sold, number of patients seen, dollars of sales adjusted for inflation, or number of employees (for R&D and administrative sites only).
6a Are you subject to Federal, State, tribal, or local regulatory requirements for this indicator? ☐ Yes ☐ No
66 If yes, explain how your initiative exceeds regulatory requirements.
SECTION E PUBLIC OUTREACH AND PERFORMANCE REPORTING  Why do we need this information? What do you need to do?  DEM needs to know how environmental processing how the facility has shared and place.
Why do we need this information?  IDEM needs to know how environmental information was shared with the public.  Please briefly describe the activities that your facility conducted during this reporting period to interact with the community on environmental issues and to report publicly on its environmental performance. Feel free, but not obligated, to attach supporting materials (e.g., meeting agendas, public announcements).  Corporate Responsibility Sustainability Report is posted on the Bristol-Myers Squibb Company website
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Environmental Stewardship Program.

In addition to ESP, please list environmental awards received or voluntary programs participated in during the past twelve months (include

information about each particular program). 2007 Southwest Indiana Chamber of Commerce John Biasini Environmental Excellence Award for

Environmental Leadership.

Has your facility taken advantage of any ESP incentives? If so, please describe the implementation process and list additional benefits IDEM should consider.

Yes. The incentives include expedited permitting, reduced frequency for routine inspections,

## extended permit terms.

- 3. If your facility was not registered to the ISO 14001 standard prior to becoming an ESP member, has ESP helped you to pursue registration? If so, how has ESP been instrumental in achieving registration?
  - We do not currently plan to register for ISO 14001, but are improving and formalizing our EMS with the assistance of IDEM-sponsored workshops.
- 4. Explain the measured or perceived results from receiving, documenting, and responding to external communication.
- How have community residents and businesses reacted to your facility participating in the Indiana Environmental Stewardship Program?
   Positive reaction
- 6. According to the measurement program developed and implemented by your facility to measure Environmental Management System success, is your facility's EMS successful? Why or why not? If not, what changes will be made to ensure continual environmental improvement and future EMS success?

Our EMS is successful through identification of regulatory and company requirements, and implementation of procedures and systems to assure compliance and continued improvement.

## **CERTIFICATION AND PLEDGE**

On behalf of Mead Johnson & Company (name of facility),

I certify that the information contained in this Annual Performance Report and attachments is accurate to the best of my knowledge and that this facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with all applicable federal, state, and local environmental requirements, or has a corrective action program in place to attain compliance.

We, Mead Johnson & Company, commit to maintaining the principles and goals outlined in our Environmental Management System for our facility's Indiana Environmental Stewardship Program status. We agree to strive for full compliance with all regulations promulgated by the U.S. EPA, state, or local jurisdictions. We agree to promote the Indiana Environmental Stewardship Program and to share our success stories with other facilities. We understand that the Annual Performance Report must be submitted to IDEM by April 1st of each year and that we must reapply to the Indiana Environmental Stewardship Program every three years.

I understand that the information provided in this Annual Performance Report will be public record. I am the senior facility manager or authorized facility signatory, and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is submitting this Annual Performance Report.

Signature

James J. Jobe

Title

Senior Vice President, global Supply Chain

Date (month, day, year)

April 1, 2008

Please mail, fax, or e-mail your completed Environmental Stewardship Program Annual Performance Report to:

IDEM-OPPTA ESP Program Manager MC 64-00 IGCS W041 100 North Senate Avenue Indianapolis, IN 46204-2251

FAX: 317-233-5627 E-mail: esp@idem.lN.gov

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## **ENVIRONMENTAL PERFORMANCE DATA**

dditional questions for environmental improvement initiatives for the following categories/indicators:

	<ul> <li>Non-Transportation</li> </ul>

In the table below, please enter the amount of energy that you currently use and that you intend to use in your future reporting year. Break the energy use down by fuel type. Please note that you need only complete those lines that are relevant to your facility. If all of your energy is purchased from a local electricity generator, you may only need to complete the first line. If the facility uses natural gas, please be sure to complete the appropriate line (natural gas is typically combusted on site so it is listed in the "onsite" section).

Please note that this table categorizes sources of energy according to where the energy is generated.

За	Is the goal of your energy use commitment to:
	Reduce total energy use
	Invest in renewable energy sources
	Combination of both strategies

3b How much energy of each type does your facility use?

		Baseline Year 20	Future Year 20	Units
	Electricity	20	20	
Energy Generated	Steam			
Off-Site	Total Energy Generated Off-Site			
	Coal			
	Natural Gas	······································		
	Crude Oil			
	Fuel Oil			
	Diesel			
	Propane / LPG			***************************************
	Gasoline			
	Hydrogen Powered Fuel Cells			
Sources of Energy	Natural Gas / Methane Powered			
Generated	Fuel Cells			
On-Site	Biomass		***************************************	
51. 51.5	Solar			
	Wind	~~~~		~~
	Landfill Gas		AMMANAMERINA	
	Geothermal			
	Hydroelectric			
	Tire Derived Fuel			
	Other Fuel or Source			
	Specify:			
	Total Energy Generated On-Site			
	able Energy Use			
Total Non-Re	enewable Energy Use			
Total Energy	Use			
<b>Metric Tons</b>	of CO2 Equivalents			
<b>Metric Tons</b>	of CO2 Equivalents			
	hrough Purchases of Electricity			
	able Off-Site Sources			
Net Metric To	ons of CO2 Equivalents			

luct nor product packaging.  Is the goal of your non-hazardous waste commitment to:  Reduce non-hazardous waste					
<ul> <li>✓ Improve waste management methods</li> <li>✓ Combination of both strategies</li> </ul>		(8p. 70m			
w much of your waste is handled using each	n management method?  Baseline Year	Future Year	Units		
Method of Waste Managed	2007	2008	Onits		
Landfill	Evansville (4124)	Evansville (3712)	Tons		
	Mt. Vernon (593)	Mt. Vernon (534)			
Incineration					
Reused/recycled off-site	Evansville (92)	Evansville (101)	Tons		
	Mt. Vernon (9)	Mt. Vernon (10)			
Other management - Specify: Total Non-Hazardous Waste					
☐ Improve waste management methods☐ Combination of both strategies  by much of your hazardous waste is handled	d using each management method?				
Method of Waste Managed	Baseline Year	Future Year 20	Units		
Landfill	Baseline Year	1	Units		
Landfill Incineration	Baseline Year	1	Units		
Landfill	Baseline Year	1	Units		
Landfill Incineration Reused/recycled off-site Treated on-site Other management	Baseline Year	1	Units		
Landfill Incineration Reused/recycled off-site Treated on-site	Baseline Year	1	Units		
Landfill Incineration Reused/recycled off-site Treated on-site Other management Specify:	Baseline Year	1	Units		
Landfill Incineration Reused/recycled off-site Treated on-site Other management Specify:	Baseline Year	1	Units		
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Landfill Incineration Reused/recycled off-site Treated on-site Other management Specify:	Baseline Year	1	Units		
Landfill Incineration Reused/recycled off-site Treated on-site Other management Specify:	Baseline Year	1	Units		

	Source	Baseline Year	Future Year	Uni
		20	20	
	Stationary Combustion			
	Mobile Sources			
	Refrigeration/AC Equipment Use			ļ
	Process/Fugitive			
Direct	Specify Source:			
Emissions	Process/Fugitive			
	Specify Source:			
	Process/Fugitive			
	Specify Source: Total Direct Emissions			ļ
	Process/Fugitive			
	Purchased Electricity			
Indirect	Purchased Steam			
Emissions	Purchased Hot Water			
211110010110	Total Indirect Emissions			
····	Other			
	Specify Source:			
Optional	Other			
Indirect	Specify Source:			
Emissions	Other			
	Specify Source:			
	Total Optional Indirect Emissions			
	Offsets			
	Specify Source: Offsets			
	Specify Source:			
Offsets	Offsets			
	Specify Source:			
	Total Reductions from Offsets			
	Total Emissions Less Offsets			
	Total CFC			-
	Total HCFC Total Stationary Combustion –			<del> </del>
0	Biomass CO2			
Supplemental Information	Total Mobile Sources – Biomass			<u> </u>
information	CO2			

Air Emissions - Total GHGs